Self-efficacy and organizing competency of head nurse dominant factors determining of nursing job satisfaction implemented in two hospitals in Riau Province

Rika Widyanaa,b, Hanny Handiyaniá,∗, Kuntartia

a Faculty of Nursing, Universitas Indonesia, Depok, West Java, Indonesia
b Dumai General Hospital, Riau, Indonesia

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KEYWORDS
Job satisfaction;
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Self-efficacy;
Head nurse

Abstract
Introduction: Lack of managerial competency of a head nurse can decrease nurse job satisfaction, which will impact overall nursing quality and patient care quality.

Objective: The purpose of this study is to identify the relationship between the managerial competencies of the head nurses it relates to the respective job satisfaction of the nurse team.

Method: The research design uses a cross-sectional approach involving 107 nurse participants at two hospitals in the Riau Province. These nurses were selected with proportioned stratified random sampling. The inclusion criteria in this study include: nurses who work within a period of more than 1 year, nurses who are not in a vacation period and nurses who were willing to participate in this study.

Results: Chi-square test results indicate that there is a relationship between the managerial competency of the head nurse and their nurses’ job satisfaction (p = 0.001; OR = 0.193). These results indicate that the factor most related to job satisfaction is head nurse competency. Particularly, these managerial competences include the ability of the head nurse to organize, be self-effacing, and efficient.

Conclusion: This study recommends improving the managerial capability of the ward manager, especially with regard to improving organization and self-efficacy skills. Implementing programs to assist with skill improvement is likely to improve the job satisfaction of nurses.

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Corresponding author.
E-mail address: honey@ui.ac.id (H. Handiyani).

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Introduction

A team of nurse’s job satisfaction is the direct responsibility of the head nurse. Prior studies in the field illustrate that job satisfaction will occur if the head nurse carries out the roles and responsibilities properly and according to the expectations of the nurse team. Increased management abilities of the head nurse will increase implementation of the management function as well as nurse job satisfaction. The head nurse as a nursing manager needs a very specific set of skills and competencies to properly manage nursing services.

Job satisfaction levels vary widely based on country and city. Job satisfaction of nurses in Greece reached 82.49%, and in Slovenia reached 64%. In Indonesia in Solok city, job satisfaction reached 51.6% and in one hospital in Makassar city, reached 51.6%. The factors correlate nurses’ job satisfaction are also varied. According to Lorber and Savic, the factors that relate to nursing job satisfaction include motivation, manager competency levels, individual career aspirations, and colleague camaraderie and colleague relationships. Other factors such as work environment, nursing skills amount of rest, salary, and the potential for promotion also influence nurse job satisfaction. Haryati and Safril also illustrate the relationship between nurse job satisfaction and continuing professional development. Similarly, job satisfaction is inseparable from the ability of the head manager to communicate and cooperate.

Interview results with eight inpatient nurses at hospital A illustrated that four nurses expressed dissatisfaction with their jobs, while in hospital B five out of eight nurses interviewed expressed satisfaction with their work. Overall, nurse job satisfaction in the two hospitals was not optimal. Many factors can influence job satisfaction levels, and it is possible that satisfaction levels can be greatly increased with more competent and skilled head nurses. Therefore, to add to the body of research on this subject, this study aims to identify the relationship between managerial competencies of head nurse and job satisfaction of the respective nurses.

Method

This is a quantitative study using a cross-sectional, analytical, descriptive approach. This study measures nurse perception of head nurse managerial competency using a questionnaire consisting of 40 statements. This questionnaire was designed by the researcher to illustrate specific aspects of nurse satisfaction. This questionnaire passed the Ethics test and was tested to be valid (0.43–0.81) and reliable (0.77). Job satisfaction levels were also measured using the MSQ (Minnesota Satisfaction Questionnaire) which was translated specifically for this study and tested for validity (0.5–0.83) and reliability (0.91) in Haryati. The researcher modified the MSQ with the addition of specific items related to job satisfaction and managerial competence. This questionnaire was then further approved by the Ethics Board and was tested as valid (0.59–0.60) and reliable (0.96). Included in this study sample are 107 nurses, selected from two hospitals (hospitals A and B) that satisfy inclusion criteria. The inclusion criteria in this study are as follows: nurses who have been working as a nurse for a period of more than one year, nurses who are not in a vacation period and nurses who were willing to participate in this study. The variables related to head nurse managerial competency (i.e., skills related to planning, organizing, laboring, directing, and controlling) were analyzed in comparison to variables related to nursing job satisfaction (i.e., like satisfaction with leader, with a partner). The relationship between these variables was analyzed using a chi-square test. There was also a logistic regression test to measure the sub-variables that most influence job satisfaction. These sub-variables being head nurse skills related to planning, organizing, laboring, directing, and controlling. The confounding variables were also analyzed, and these variables consisted of: age, gender, education levels, length of employment, career path, and self-efficacy levels (nurse).

Results

The average age of nurses in both hospitals is 30.83 years with a standard deviation of 4.988 years. The length of employment of nurses in both hospitals has a median of 3 years with the shortest working period being one year and the longest working period being 11 years. The inpatient nurses in both hospitals were mostly female (86%) with the majority of education levels being diploma/college (81%). The nurse career path was dominated by clinical nurse 1 (74%). Lastly, slightly more than half the nurses were measured as demonstrating self-efficacy (59%).

Job satisfaction levels indicate that more than half of the inpatient nurses at these two hospitals felt dissatisfied with their work (54%). The ability of the head nurse to perceive dissatisfaction by 53% and satisfaction reached 47%. Results indicated that slightly more than half of the nurses perceived that the head nurse had good managerial competency (54%).

Based on data analysis, there was no significant relationship between age (p = 0.361), gender (p = 0.851), working period (p = 0.803), or education level (p = 0.385) and job satisfaction. However, there was a significant relationship between career path and job satisfaction (p = 0.026) and self-efficacy and job satisfaction (p = 0.001). The relationship between head nurse managerial competency and nurse job satisfaction can be seen in Table 1.

Table 1 illustrates the proportion of the nurses who are satisfied with their work and who perceive the head nurse as being managerial competent (33%) is greater than the proportion of nurses who rank as having low satisfaction with their work and who perceive head nurse managerial competency as poor (8%). Results of Table 1 demonstrate that there is a significant relationship between head nurse managerial competency and nurse job satisfaction (p = 0.001; χ² < 0.05). Results from the analysis SPSS also indicate that nurses who perceive the head nurse as competent either have 0.193 times the chance of being satisfied with their work. Particularly, nurses who perceive their head nurse as being highly organized have the highest chance (9.627 times) of being satisfied in their work.

The results of data analysis from multivariate tests demonstrate that the factors relating most to nurse job satisfaction are competencies in organization and self-efficacy.
Table 1 The relationship between head nurse managerial competency with nurse job satisfaction in two hospitals in Riau province, 2018 (n = 107).

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Job satisfaction</th>
<th>OR (95% CI)</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>Satisfied</td>
<td></td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td><strong>Managerial competency of the head nurse (composite)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>36</td>
<td>34</td>
<td>9</td>
</tr>
<tr>
<td>Good</td>
<td>27</td>
<td>25</td>
<td>35</td>
</tr>
<tr>
<td><strong>Planning</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>35</td>
<td>33</td>
<td>11</td>
</tr>
<tr>
<td>Good</td>
<td>28</td>
<td>26</td>
<td>33</td>
</tr>
<tr>
<td><strong>Organizing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>38</td>
<td>35</td>
<td>6</td>
</tr>
<tr>
<td>Good</td>
<td>25</td>
<td>23</td>
<td>38</td>
</tr>
<tr>
<td><strong>Workforce</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>30</td>
<td>8</td>
</tr>
<tr>
<td>Good</td>
<td>31</td>
<td>29</td>
<td>36</td>
</tr>
<tr>
<td><strong>Directing</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>32</td>
<td>30</td>
<td>11</td>
</tr>
<tr>
<td>Good</td>
<td>31</td>
<td>29</td>
<td>33</td>
</tr>
<tr>
<td><strong>Controlling</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Low</td>
<td>34</td>
<td>32</td>
<td>14</td>
</tr>
<tr>
<td>Good</td>
<td>29</td>
<td>27</td>
<td>30</td>
</tr>
</tbody>
</table>

* Meaningful on p < 0.05.

Discussion

Analysis of job satisfaction data indicates that job satisfaction levels are nonetheless lacking. This is shown in job satisfaction frequency; 44% of nurses are satisfied with their work, and 54% of nurses are dissatisfied with theirs. These results are similar to results shown in Pranata et al. Inpatient nurses’ at one hospital in particular, in Palembang city, not get job satisfaction yet (52.7%). This showed that the level of job satisfaction of nurses’ in a ward at both hospitals requires an increase. Hajdukova and Klementova illustrate the importance of that job satisfaction plays in increasing the motivation to improve the nurses’ overall performance. Low job satisfaction levels in both hospitals may result in a lower standard of service care which may in turn result in complaints from the families of patients.

Based on the results of the data analysis, head nurse managerial competency is perceived as good slightly more than half of the time (58%) and perceived as unsatisfactory slightly less than half of the time (42%). These results differ from that of Sari et al. who indicated that a majority of head nurses are perceived as being competent managers (92.5%). According to Putra and Subekti, how well head nurse tasks will be executed depends on management abilities, particularly management abilities related to patient services and human resources. According to the present study’s data analysis, in both hospitals head nurse, managerial competency is perceived as good when head nurses are accredited and when they participate in professional development. The accreditation within these two hospitals seems to influence perceived head nurse competency levels. It seems that the existence of training and of the accreditation process encourage the head nurse to perform their duties in accordance with standard procedures, and thus allows them to be perceived as more competent by other nurses.

As stated, the present results yield a significant relationship between head nurse managerial competency and nurse job satisfaction (p = 0.001). Conversely, Pranata et al. indicate that managerial function of the head nurses is not related to nursing job satisfaction. Other researchers, like Lorber and Savic, highlight that there is indeed a significant relationship between head nurse managerial competency and nurse job satisfaction (p = 0.001). According to Erjavec and Stark, head nurse competency includes the ability, knowledge, expertise, and attitude of a manager, and the overall capacity to manage nursing services.

The results of the statistical test indicate a significant relationship between perceived organizational competencies of the head nurse and nurse job satisfaction (p = 0.001). Verawati and Novayelinda, similarly demonstrated a significant relationship between head nurse organization competencies and respective nurse job satisfaction levels (p = 0.004; α < 0.05). Based on these findings, it seems that implementing training to increase head nurse organizational competencies can increase respective nurse satisfaction, and patient satisfaction as well.

The data analysis further indicates that head nurse organizational competencies and overall self-efficacy are the most dominant factors related to nursing job satisfaction. In
this study, organizational competences are defined as how well the head nurses provide care and how well the head nurses meet goals in providing exceptional patient care. According to Verawati and Novayelinda, head nurses with exceptional organizational competencies are able to manage, regulate, and delegate personnel, financial resources, materials, and procedures. In doing so, they are able to achieve organizational goals. Therefore, if the head is nurse meets these organizational standard, they will have a positive, increasing impact on nurse satisfaction.

Self-efficacy is a generative (cognitive, social, and emotional) capacity to achieve goals and abilities must be trained and regulated to gain positive aspect. Nurses who possess high levels of self-efficacy will likely be able to think positively and will complete difficult tasks with relative ease. Therefore, inpatient nurses who possess higher levels of self-efficacy will likely be more able to work collaboratively with colleagues and thus be more likely to achieve organizational goals.

Studies further demonstrate that satisfaction usually relates to the employee age, employment situation, work environment, or management situation. The organizing competency becomes an influential factor in increasing satisfaction. The head nurse will manage effectively and efficiently the use of existing resources including human resources. The one important thing of the organizing function is the allocation of tasks in accordance with the nurse competency. The allocation of the tasks performed if it is in accordance with the competency and characteristics of the worked, the nurses will be satisfied with the placement. But in reality, there are still have a feel less satisfied with this allocation. It is necessary to complete hospital evaluations at least once every three months to determine the competence levels of head nurses, particularly their organizational competences and self-efficacy levels. It is likely that adding professional development and continual training will increase these competencies, skills, and levels of self-efficacy.

Conclusion

The results of this study indicate that the head nurse managerial competencies relate to nursing job satisfaction. In this study, the most job satisfaction is primarily influenced by head nurse organizational competences and head nurse self-efficacy levels. The organizing function of the ward manager seen from how the head nurse divides the duties and responsibilities of the nurses. The nurses will be satisfied with their jobs if the allocation of tasks and responsibilities is in accordance with their respective competencies. If this is properly allocated, nurses will seemly be further able to perform their duties in accordance with the capabilities. Nurses with high self-efficacy will also seemingly be able to better accomplish their tasks. In conclusion, these studies indicate that nurse job satisfaction is related to the managerial competency of the head nurse especially the head nurse’s ability to organize efficiently.

Conflict of interests

The authors declare no conflict of interest.

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